● PRINTER RUSH ●
(PTO ASSISTANCE)

Application : 10/605904   **Examiner :** Abebe, D   **GAU :** 2655

From: (signature)   **Location:** IDC FMF FDC   **Date:** 03-30-05

Tracking #: 06087297   **Week Date:** 03-14-05

DOC CODE	DOC DATE	MISCELLANEOUS
☐ 1449	_____	☐ Continuing Data
☐ IDS	_____	☐ Foreign Priority
☑ CLM	12/2/2004	☐ Document Legibility
☐ IIFW	_____	☐ Fees
☐ SRFW	_____	☐ Other
☐ DRW	_____	
☐ OATH	_____	
☐ 312	_____	
☐ SPEC	_____	

[RUSH] MESSAGE: Improper Dependency - Original claim 9 depends upon canceled original claim 2. Please Resolve.

Thank You
(initials)

[XRUSH] RESPONSE: _____

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INITIALS:

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.

REV 10/04